PATENT APPLICATION LE DETERMINATION RECORD 10/505476												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	NTITY	OF.	OTHER	
T	OTAL CLAIMS	S				·			FEE] .	RATE	FEE
FOR .			NUMBER	RFILED	NUMBER EXTRA			BASIC FE		OR	BASIC FEE	<u> </u>
T	TAL CHARGE	ABLE CLAIMS.	20 minus 20=		- Signer State of the State of			XS 9=		ÖR	X\$18=	
INI	DEPENDENT C	LAIMS	6 "	ninus 3 =		3		X43=		OR	X86=	
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT				-145=		1	-290=		
*. If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	 	OR		
	CLAIMS AS AMENDED - PART II								<u> </u>	JOR	TOTAL	THAN
	306	(Column 1)	MENDE	(Column 2) (Column 3)				SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO.	Total	./2	Minus	-26		= /		X\$ 9=	ŀ	OR	X\$18=	
AME	Independent	. 4	Minus	4	2	/		X43=		OR	X86=	
	FIRST PRESE	JETIPLE DE	LTIPLE DEPENDENT CLAIM				+145=		OR	+290=		
								TOTAL		OR	TOTAL ADDIT, FEE	
· .·····	(Column 1) (Column 2) (Column 3)											
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		= .		X\$ 9=		OR	X\$18=	
	Incependent	•	Minus			=		X43=		OR-	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\	+145=		OR	+290=	·
									••	OR ,	TOTAL ADDIT, FEE	~
ADDIT. FEE ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3)												
AMENDMENT C	:	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=	
ME	Independent	en en somme source above a	Minus	and the same and the same transfer as and the same and th		en wer en mer		X43=	· ,	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		Ì		
0 11	* If the entry in Column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	<u>.</u>
- 1	the "Highest Nur	mber Previously Pa mber Previously Pa	id For IN THI	S SPACE is	less thar	20. enter "20."	A	. TOTAL DDIT. FEE		OR A	TOTAL DDIT. FEE	
		iber Previously Paid					foun	d in the app	rodusie pox	m colu	ımn I.	

FORM RTO ATS I Par 10:01: